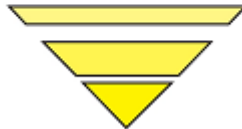


Individualized Supported Living Service and Budget Manual

June 5, 2017

Revised April 6, 2018

**DIVISION OF
DEVELOPMENTAL
DISABILITIES**



Missouri Department of Mental Health
Division of Developmental Disabilities
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PHILOSOPHY

Individuals with developmental disabilities have a right to make responsible decisions consistent with the choices afforded citizens without disabilities. These decisions include, within attainable means, living in homes and neighborhoods of their choice with persons of their choosing. These settings and life styles afford people the opportunity to pursue their own interests, express their individuality, and actively participate in their communities. To exercise these rights, individuals with developmental disabilities may need uniquely individualized assistance.

ISL Providers shall maintain compliance with 42 CFR 441.301.

PRINCIPLES/CHARACTERISTICS

Individualized Supported Living is characterized by creativity, flexibility, responsiveness, and diversity as reflected by the following:

1. People live and receive needed supports in the household of their choice which might include their family home, an apartment, condominium, or house in settings typical of people without disabilities. The selected housing should represent an adequate standard of living common to other citizens, allowing for reasonable protection and safety.
2. Personal preferences and desires are respected. Personal autonomy and independence are promoted. Individuals receiving services lead the planning, operation, and evaluation of services. Self-determination is maximized through natural and paid supports.
3. Supports are focused on assisting the individual in experiencing a full productive life as defined by the individual.
4. Services are provided based on individual needs.
5. Individuals are encouraged and supported to actively participate in civic activities and community organizations to become as involved as they choose in the fabric of the community. Service goals are directed toward participation in the life of one's own community.

BUILDING INTERDEPENDENCE

Interdependence implies reciprocity. This can be seen in the give and take of human relationships. Relationships entail a mutual dependence which involves reliance on others and requires complementary interdependence on both parts.

Through the use of community resources the lives of individuals with disabilities are enriched through opportunities, choices, and relationships. Interactions with other members of the community increase and expand opportunities for a variety of experiences. Genuine relationships develop naturally as more people become involved in the lives of individuals with disabilities. At the same time, natural support systems and advocacy networks can develop.

Specific examples of the implications of these principles follow.

HOUSING

Possibilities for housing may include:

- Family homes where an individual remains a part of an intact family structure or has a portion of the home as his or her own;
- Purchased property owned by the individual with disabilities is a realistic option through subsidized loans such as those provided by the Farm Home Administration or through low-interest fixed-rate loans such as those available through the Missouri Housing Development Corporation, USDA Rural Development, or trusts;
- Property purchased through cooperatives involving two or more individuals;
- A life-lease which allows occupancy until the individual's death when the property reverts to other heirs;
- Rental homes or apartments leased or rented through typical landlords;
- Existing HUD apartments and rent subsidies to landlords.

Service Site Assessment

An initial assessment of the ISL premises will occur prior to an individual moving into an ISL by the individuals Support Coordinator. The provider will be present at the time of the assessment. The assessment will be a physical review of the potential home. The results will be summarized in writing indicating whether the location meets the needs of the individuals, or if repairs or modifications are needed. If repairs or modifications are needed, the provider will ensure the repairs or modifications are made in a timely manner.

The Support Coordinator should be notified 30 days prior to a move so that an assessment of the new location can be completed. No moves should take place without prior approval.

The ISL Environmental Site Review Tool shall be used to complete the assessment as found in Appendix I and as an independent document at <http://dmh.mo.gov/dd/forms.html>

SUPPORTS

- Adaptations to the Environment: Environmental adaptations allow for greater freedom and privacy, as well as peace of mind, not only to the individual served, but also to families and others involved in the life of the individual. Often an individual's home can be modified to be accessible for a relatively modest cost. Adaptations in an ISL setting, are allowed if the home is owned or leased by the person, their family or designated representative but must not be owned or leased by the lead agency. Other examples include telecommunication devices, tactile alarm signaling systems, and electronic life lines. Any adaptations made to the home, such as assistive technology devices, shall be specified and justified in the individual's ISP, and shall not duplicate supports already within the ISL budget.

- **Transportation:** Community transportation can sometimes be accessed through city transit lines, locally provided transportation services, car pools, cabs, friends, neighbors, family members, or fellow club and church members. Transportation through community sources continues to be a very challenging issue in some localities. Continued utilization of specialized services does not allow development of solutions to transportation problems or provision of alternative, more integrated services.
- **Public Education Resources:** There are numerous examples of services already available. They include public schools (GED, technical/vocational, adult classes); higher education (adult continuing education); public health (nutrition, maternal child care, basic health and sexual education).
- **Employment:** Individuals are supported to pursue vocational interests as they desire, including community employment and other systems such as Vocational Rehabilitation.
- **Recreation and Leisure:** Individuals participate in the community for recreation and leisure by becoming members of town-league softball teams, local bowling leagues, garden clubs, church groups, sewing circles, dances, sporting events, theatre groups, and by contributing to volunteer projects within the community, etc.
- **Goods and Services:** As customers and consumers using the same community services all citizens use for shopping, banking, restaurants, entertainment, and worship, etc. individuals with disabilities exercise their citizenship within the community at large.

NETWORKING

Successful networking begins with a comprehensive knowledge of the individual. It is essential to know the individual's desires, preferences, interests, and abilities, and what supports he/she may need. Knowledge of the types of community resources and those who provide them is important. Educating the community is an important component of helping people to be included in their community.

Following is the Individualized Supported Living Service Definition in the DD Comprehensive waiver approved by CMS in the renewal application effective July 1, 2011.

INDIVIDUALIZED SUPPORTED LIVING SERVICE AND DESIGN

Individualized Supported Living (ISL) is characterized by creativity, flexibility, responsiveness and diversity. Individualized supported living enables people with disabilities to be fully integrated in communities. ISL services provide individualized supports, delivered in a personalized manner, to individuals who live in homes of their choice. Individuals receiving ISL supports may choose with whom and where they live, and the type of community activities in which they wish to be involved.

Individualized supported living reflects these principles:

a) People live and receive needed supports in the household of their choice which might include their family home, an apartment, condominium, or house in settings typical of people without disabilities. The selected housing should represent an adequate standard of living common to other citizens, allowing for reasonable protection and safety

- b) Personal preferences and desires of those served are respected. Personal autonomy and independence are promoted. Individuals receiving services lead the planning, operation, and evaluation of services. The participant's self-direction and control leading toward self-governance are maximized through services rendered.
- c) Existing resources and natural supports, paid and unpaid, are maximized from the community at large.
- d) Training focuses on acquiring functional, useful skills within the home and community. Services minimize the need for skill transfer by providing training in the environment in which the skills are required.
- e) Services are "outcome" focused, addressing the quality of life being experienced in the present life style and not in the potential future implied by skill development/attainment.
- f) Services are provided based on individual needs.

Housemates

If individuals choose to live with housemates, no more than four individuals receiving ISL services may share a residence. Individuals receiving ISL services and sharing a home with housemates shall each have a private bedroom. Couples sharing a home where one or both of the couple receives ISL services may share a bedroom if they so choose.

Individualized Outcomes and Supports

This service provides assistance and necessary support to achieve personal outcomes that enhance an individual's ability to live in and participate in their community. ISL services and supports are individually planned and budgeted for each person served. Services are designed to assist participants in acquiring, retaining and improving the self-help, socialization and adaptive skills necessary to reside successfully in home and community-based settings. Individualized supported living service may also include assistance with activities of daily living and assistance with instrumental activities of daily living, depending upon the needs of the individual. Services may include up to 24 hours of support including a combination of habilitation and/or personal support as specified in his/her Individual Support Plan (ISP).

Choice of Provider

Each resident in the home has free choice of provider and is not required to use the same ISL provider chosen by their housemates.

Service Site Lease/Ownership

The residence (house or apartment) is a private dwelling, not a licensed facility and must be owned or leased by at least one of the individuals residing in the home and/or by someone designated by one of those individuals such as a family member or legal guardian.

Professional Manager

Providers of ISL supports must have a professional manager who supervises and manages all aspects of the ISL program. The professional manager must have a bachelor's degree or may have relevant experience that substitute for the degree. The costs for professional management are incorporated into the providers hourly cost for direct support staff. The professional manager responsibilities include:

- a. Staff training;
- b. Staff supervision;
- c. Quality enhancement monitoring;
- d. Direct plan implementation for individuals as needed;
- e. Monitoring implementation of outcomes;
- f. Establishing information collection systems;
- g. Writing monthly reviews;
- h. Oversight/coordination of all the person's programs and services being received;
- i. Coordinating the development of the ISP (scheduling, facilitation and summary document).

Registered Nurse

Each person who receives ISL supports is required to have a monthly minimum of 30 minutes of contact by a Registered Nurse (RN). The amount will be specified in each person's ISP. The RN service will be authorized separately from the ISL budget and billed in 15 minute increments (2 units monthly per person minimum) under the waiver code for ISL Residential Nursing and will be authorized on an annual basis; enabling a provider flexibility to provide services as needed, with the expectation that a minimum of 30 minutes be provided each month.

Transportation

The ISL budget shall not include transportation costs. Transportation will be a separately approved service under the Transportation code to include the use of staff or vendor vehicles. When staff vehicles are used for transporting the individual, any reimbursement to the ISL agency to provide this separately authorized transportation shall be passed onto the staff providing the transportation. If transportation is authorized and provided for the person receiving ISL service, the documentation shall include staff mileage logs that include the person's full name, dates with mm/dd/yy, locations to include to and from without the use of a provider's acronym, miles transported, odometer readings for each trip, and full signature of staff per each day transported.

ROOM AND BOARD

Room and Board costs for the waiver participant are not billable to the waiver.

The spirit and intent of these guidelines is to assist the individual and the planning team in setting up the individual's room and board budget. The team will maximize all available resources and assist the person to make fiscal choices to live within their means.

Both sides of the budget form must be completed when applicable. If a representative payee is responsible for the individual's funds and will be responsible for costs to the left side of the budget, please indicate on the form.

Individuals will be supported to live within current financial resources available. The room and board side of the budget should be limited to those resources. In planning for residential supports, the planning team, which includes the individual, should decide in advance what amount the individual can afford for room and board.

MO HealthNet spend-down will be taken into account when determining an individual's available resources. The individual's benefits and wages less any spend down and other planned expenses such as medical co-pays, insurance premiums, clothing allowance, etc. equals available income.

If the room and board side of the ISL budget is completed, the following applies:

- Costs should not exceed a person's monthly income/resources. If a room and board subsidy is paid by the Division of DD, any increase to this subsidy, for example rent and/or utilities increases, must be prior approved by the planning team and approved through the UR process and the Regional Director or Designee.
- Division of DD will not pay a room and board subsidy to persons living in homes that they or family members own.
- Documentation of expenditures paid from individual's resources (e.g., phone, utilities, laundry, lawn care, snow removal, etc.) shall be kept on file and made available upon request.

Rent

- The initial budget will include a cost estimate for rent. The signed lease/rental agreement will be made available for review if requested for subsequent years or any changes to the rent. Cost of housing must be shared equally by all persons who live in the home.
- Efforts should be made by the individual and the planning team to secure affordable housing through all available resources (HUD vouchers, Section 8, etc.).

Utilities and other related costs

Includes but not limited to phone, basic cable, water, sewer, electric, gas, renter's insurance, internet, any laundry service, etc.

Food and Household Supplies Expenses

- As a general rule individuals should be encouraged to apply for food stamps. The food budget may be reduced by the awarded food stamp amount, if applicable.
- The need for higher amounts for specialized diets must be documented in the plan if it exceeds their available resources.
- Household supplies include items such as cleaning products, laundry goods, paper products and soap.
- Household supplies may also include basic hygiene items such as shampoo, toothpaste, deodorant, feminine products.

Maintenance and Household Repairs

- Routine maintenance is part of a normal rental agreement and should generally not be on the budgets.
- Lawn service.
- Repairs for damage done by an individual will be evaluated on a case-by-case basis, including a payment plan as deemed appropriate by the team and as approved by Regional Director.

Personal Allowance

Social Security requires a minimum of \$30 personal spending allowance.

BUDGET DEVELOPMENT

Individualized supported living (ISL), also called residential habilitation is provided on a per-day basis. The unit of service is a 24-hour period. The rate for a day of service is to be derived by developing an estimated amount of support the person will need per 7-day week for the whole plan year, based on the estimated average number of hours of direct staff support.

Staffing Pattern

Providers are required to submit the direct support staffing pattern using the Medicaid Home and Community Based Waiver Staffing Pattern Schedule form found in Appendix II and as an independent document under this manual at <http://dmh.mo.gov/dd/manuals/> with the initial budgets or when requesting a daily rate change. The staffing pattern reflects the ratio of Direct Care staff each individual is receiving support from. The hours are based on needs documented in a person's ISP. Generally the Division of DD cannot financially support individuals living alone who require more than 16 hours of staffing per day; therefore, sharing of staff resources should be considered when appropriate and in the best interest of individuals' served.

Budgets may allow for known exceptions (this includes but may not be limited to: planned vacations from work, planned days off from school, commonly recognized holidays, known surgeries which may require leave from work and/or school).

The daily hours of direct support staff, when combined with other services (community integration, employment supports, etc.) shall not exceed 24 hours per day. Behavior analysis and professional assessment and monitoring may be provided during times when direct support staff is providing services. These professionals will observe services and consult with direct support staff.

The following costs are included in the ISL (residential habilitation) service covered in the waiver and billed to MO HealthNet. These costs are detailed on the right side of ISL budget.

Direct Support

Direct support staff costs shall include all costs related to the provision of individualized supported living, including the cost of professional management, back-up supports, and all administrative costs. There will be no rate differential for awake or sleep staff. .

The budget should include an estimate of the number of hours of direct support that each individual will require on a monthly basis, which matches the information presented on the staffing pattern.

Back Up Support

Providers shall be responsible for Back up Support. This cost is included in the direct support rate. The agency providing ISL supports assumes the responsibility for providing a "safety net" for the individual. This includes, but is not limited to:

- Maintenance of a phone number to be answered 24 hours and to assure a regular point of contact for the person supported;
- Provide a back-up plan should other supports fail to materialize as planned;
- Assuring communication regarding changes in the person's life (health, behavior, employment, etc.), with those important to the individual, including, but not limited to: Family/guardians, educational staff, employer, day program, case manager, physicians, etc.

Administrative Costs

All administrative costs are included in the direct support rate. Administrative costs shall include capital office costs, office supplies/equipment, office utilities; or contracted business expenses such as account/audit costs and management fees. Per 9 CSR 45-4.010 (1) (A) Administrative costs include staff time spent in administration, staff time that cannot be directly associated with direct support, including professional management and other costs that are not directly associated with a specific service.

Room and board costs for an unrelated live-in personal caretaker: Room and board costs for an unrelated live-in personal caretaker, identified as the additional cost which an individual being served must incur for additional room, food and utilities occupied or consumed by such a caretaker, may be added to the residential habilitation costs on the right side of the budget. This payment requires that the provider of ISL and/or the live-in caretaker contribute the same amount to the individual being served for payment of rent or utilities or for purchase of food. This payment is not available if the participant resides in the home of a caregiver or in a home owned or leased by the provider of ISL.

ISL Budget Form

- All budgets will be submitted on the approved budget format, found in Appendix III and as an independent document at <http://dmh.mo.gov/dd/forms.html> No other format will be used.
- ISL budgets shall have all appropriate signatures and use of the Medicaid Home and Community Based Waiver Staffing Pattern Schedule form - which supports the Direct Support hours on the ISL budget. The staffing pattern can be found in Appendix II and as an independent document at <http://dmh.mo.gov/dd/forms.html>
- It is the responsibility of the authorizing agency to ensure the ISL budgets are approved in a timely manner. An ISL progress note shall be used by all ISL provider agencies to include headings which support the following documentation:
 - Individual's first and last name with middle initial or date of birth
 - Service dates to include mm/dd/yy
 - Time in/out with am/pm
 - Legible signature and title of staff providing the service, and date service was provided
 - Section in the form that allows for the tasks or objectives to support the time being billed.
- If "Other" is listed on the ISL budget, it must be indicated in the ISP regarding the need for "Other" and will be required to meet the adequate documentation requirement.
- Regional Offices, TCM providers, and ISL providers shall avoid the use of their own acronyms in ISL documentation, unless they provide a legend of the acronyms at the time of audit.

SERVICE AUTHORIZATION

The ISL budgets shall be authorized through, and in conjunction with, the entire plan year. New budgets may be submitted when there has been a significant change that is expected to be on-going. Budgets are developed for new or additional services as needed and time limited if necessary. This will allow for additional staffing or other needs that may be increased or reduced after the initial startup of the service.

Providers shall keep all pertinent fiscal records and other back-up documentation as per provider contract.

RATE/BUDGET CHANGES

Rate/Budget changes should be submitted when there is a major life change, such as the person moves, gets or loses a job, loses a housemate.

Any reduction in services is to be reported to the Missouri Medicaid Integrity Unit after twelve consecutive months as designed by provider's policy or at time of service termination.

Individuals will continue to receive supports as outlined in their plans during changes and transitions in housemates. Budgets will be recalculated as necessary with Utilization Review approval to assure continuation of services to assure health and safety and meet individual need. The Regional Office Assistant Director for Habilitation must be notified within three (3) business days of any status change that may affect the ISL budget, such as loss of a housemate.

When a person receives no direct staff support during a 24-hour period (e.g., a hospitalization or visiting someone without paid supports), the provider must not bill for this 24-hour period, which begins and ends at midnight. CIMOR will adjust the daily rate up to the maximum allowable as approved by CMS in the waiver. Changes beyond this will be according to Division Directive 5.040.

Authority for these guidelines:

- Comprehensive Waiver MO.0178.90.R3
- DD Waiver Manual
- DMH Master Contract
- 9 CSR 45-3.020
- 42 CFR 441.301

This manual will be reviewed and updated, if needed, within one year of issuance.

NEW ISL ENVIRONMENTAL SITE REVIEW

Provider:

Date of Review:

ISL Address:

New Provider Site:

Individual(s):

Current Provider Expansion/Relocated Site:

Support Coordinator:

Prior to entering into a new lease arrangement, the environment is assessed by the individual(s) Support Coordinator to determine whether the home meets the needs of the individual(s) and is compliant with regulation, including the Home and Community Based Services rule. This applies to moves within the same service provider. The provider is present for the assessment to assist with evaluation. If the site does not meet the needs of the individual(s), remediation must occur prior to approval or a new location identified. The Support Coordinator completes the document, summarizing any findings and corrective actions; emails a copy of the document to the provider and their Provider Relations representative.

PART I: Assessed prior to lease implementation

Home Interior	Satisfactory	Unsatisfactory	Comments/Action Needed
Overall interior environment appears clean and well maintained (flooring, stairs, no pests, no odors, no broken doors/windows/screens, no broken door or window locks, etc.) and exists in a neighborhood or apartment complex amongst homes which do not serve individuals receiving HCB services.	<input type="checkbox"/>	<input type="checkbox"/>	
Site meets the needs of the individuals who live there or has modifications/adaptations that meet their needs (ramps, accessible bathroom, wide halls and/or doorways, stairs wide enough with railings and lit for safe use, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	
Water temperature (if water is turned on): An individual should be able to hold a hand under the tap without the temperature feeling so hot the hand needs to be removed (should not exceed 120 degrees unless approved in plan).	<input type="checkbox"/>	<input type="checkbox"/>	
Home temperature (if heat/air conditioning turned on): what is comfortable to the individual or 71-81 degrees.	<input type="checkbox"/>	<input type="checkbox"/>	
If not on public water supply, requires initial water inspection and annually thereafter.	<input type="checkbox"/>	<input type="checkbox"/>	
There is at least two means of exit (one of which can be a window) on each floor. If one exit is a window, ensure it is an appropriate means of egress (accessibility) for each individual's use. If a second floor is being used the planning team must plan for fire escape prior to move.	<input type="checkbox"/>	<input type="checkbox"/>	
Means of exit are not blocked, the exit doors open easily and the individuals can access all means of exit.	<input type="checkbox"/>	<input type="checkbox"/>	
There is an operable smoke detector in/near each bedroom and minimum of one smoke detector on each level of home. It is also recommended a detector be placed near the kitchen.	<input type="checkbox"/>	<input type="checkbox"/>	
Carbon monoxide detectors are present on each level of the home and operable when there is an attached garage and/or propane or natural gas furnace or appliances.	<input type="checkbox"/>	<input type="checkbox"/>	
Bedrooms: A separate bedroom is present for each individual. <i>Guidelines from International Property Maintenance Code: minimum of 70 sq. ft. floor space and at least 7 feet in any horizontal direction. At least 1 exterior window whose size is a minimum 10% of the room's</i>	<input type="checkbox"/>	<input type="checkbox"/>	

Home Interior	Satisfactory	Unsatisfactory	Comments/Action Needed
<i>floor space and easily opens for ventilation. At least half the bedroom ceiling is at least 7 feet tall. A heating and cooling element (no space heaters; window AC is permissible); at least two electrical outlets. Must not have to go through a shared bath or another bedroom to access a bedroom.</i>			
Bathrooms: Clean with appropriate fixtures. No mildew, cracks in sink/tub, or leaks. An exhaust fan or window. At least one bathroom must be accessible without passing through a person's bedroom.	<input type="checkbox"/>	<input type="checkbox"/>	
Kitchen: Appliances are be in good working order. Kitchen has a stovetop fan or a window for ventilation.	<input type="checkbox"/>	<input type="checkbox"/>	
Furnace and water heater: Clear of any flammable material and should not be located in an unsafe area (should not be in a general living area, i.e. kitchen or bathroom).	<input type="checkbox"/>	<input type="checkbox"/>	
Dryer has a vent to the outdoors, under the house, or to garage, etc.	<input type="checkbox"/>	<input type="checkbox"/>	

Home Exterior	Satisfactory	Unsatisfactory	Comments/Action Needed
Overall exterior environment appears clean and well maintained (lawn care, stairs, deck, driveway, sidewalk, roof, siding/exterior, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	
The setting is physically accessible to the individual. (HCBS requirement)	<input type="checkbox"/>	<input type="checkbox"/>	

HCBS REQUIREMENTS			
Is this Location Provider Owned and Controlled? The setting is provider owned or controlled if the provider leases from a third part or owns the property. If the provider does not lease or own the property, but has a direct or indirect financial relationship with the property owner, we would presume that the setting was provider controlled. A direct or indirect relationship includes any organization affiliated with the provider or their parent company; any staff of the provider, an affiliated organization, or their family members. <input type="checkbox"/> YES <input type="checkbox"/> NO			
<i>Continue with review of HCBS requirements regardless of provider owned/controlled status.</i>	Satisfactory	Unsatisfactory	Comments/Action Needed
Will there be a lease, residency agreement or other form of written agreement in place for each HCBS participant, providing protections that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law? If provider owned and controlled, please attach the lease template. Select "Unsatisfactory" if template is not available as the site cannot be used for HCBS services unless the documentation is in place.	<input type="checkbox"/>	<input type="checkbox"/>	
Each individual has privacy in his or her sleeping or living unit.	<input type="checkbox"/>	<input type="checkbox"/>	
Is the Residence entrance doors lockable by the individual, with only appropriate staff having keys to doors?	<input type="checkbox"/>	<input type="checkbox"/>	
Is the bedroom door lockable by individual, with only appropriate staff having keys to doors? (best practice)	<input type="checkbox"/>	<input type="checkbox"/>	
Does the bathroom door lock? (best practice)	<input type="checkbox"/>	<input type="checkbox"/>	
Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement.	<input type="checkbox"/>	<input type="checkbox"/>	
Are cameras present inside the setting?	<input type="checkbox"/>	<input type="checkbox"/>	
*If yes, the agency's policies on the use of camera's must be approved by the Division and			

due process must be given to each individual that moves into the setting and agency			
Do individual's rooms have a telephone jack, WI-FI or ETHERNET jack? (individuals choice)	<input type="checkbox"/>	<input type="checkbox"/>	

HEIGHTENED SCRUTINY

Any service and/or site having the appearance of being Heightened Scrutiny requires prior Division approval. If the service/site matches any of the descriptors below, mark Yes.

	Yes	No	Comments/Action Needed
<ul style="list-style-type: none"> Any setting that is located in a building that is also a publicly or privately operated facility that provides inpatient institutional treatment, or in a building on the grounds of, or immediately adjacent to, a public institution, or any other setting that has the effect of isolating individuals receiving Medicaid HCBS from the broader community of individuals not receiving Medicaid HCBS <ul style="list-style-type: none"> Is the setting primarily for people with disabilities with on-site staff providing services to them? Is the setting designed specifically for people with disabilities? Does the setting limit individuals' opportunity for interaction with the broader community, including with individuals not receiving Medicaid-funded HCBS? 	<input type="checkbox"/>	<input type="checkbox"/>	

	Yes	No	Comments/Action Needed
THIS SERVICE LOCATION MEETS THE NEEDS OF THE INDIVIDUAL(S). TCM staff to e-mail this document to the Provider and Regional Office Provider Relations prior to move.	<input type="checkbox"/>	<input type="checkbox"/>	

Reviewer Signature/Title: _____ Date: _____

cc: Provider
Provider Relations

PART II: The following miscellaneous requirements must be present prior to the first day of services at the site. Support monitoring verifies within 30 days of possession of the property if items were not available at initial site review.

Miscellaneous requirements	Satisfactory	Unsatisfactory	Comments/Action Needed
Basic first aid supplies are available. It is also recommended a CPR mask be included.	<input type="checkbox"/>	<input type="checkbox"/>	
The home has at least one fire extinguisher in or near the kitchen. Fire extinguisher has expiration date or preventative maintenance tag and is fully charged.	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency evacuation plan (i.e. in the event of fire) has been developed and meets the needs of the individual(s).	<input type="checkbox"/>	<input type="checkbox"/>	
Information regarding fuse box, gas shut off valves, and water shut off valves is present in the home and individual(s) and staff are trained in appropriate procedures.	<input type="checkbox"/>	<input type="checkbox"/>	

	Yes	No	Comments/Action Needed
SUPPORT MONITORING CONFIRMED THE MISCELLANEOUS ITEMS ARE IN PLACE. TCM staff to e-mail this document to the Provider and Regional Office Provider Relations if not verified prior.	<input type="checkbox"/>	<input type="checkbox"/>	

Reviewer Signature/Title: _____ **Date:** _____

cc: Provider
Provider Relations

Appendix II: Staffing Pattern

Agency Name:						Individual #1																				
DATE:						Individual #2																				
						Individual #3																				
	SUNDAY			MONDAY			TUESDAY			WEDNESDAY			THURSDAY			FRIDAY						SATURDAY			HOUSE SUM	
	#1	#2	#3	#1	#2	#3	#1	#2	#3	#1	#2	#3	#1	#2	#3	#1	#2	#3	#1	#2	#3					
7am																							0.00			
8am																							0.00			
9am																							0.00			
10am																							0.00			
11am																							0.00			
12pm																							0.00			
1pm																							0.00			
2pm																							0.00			
3pm																							0.00			
4pm																							0.00			
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2am																							0.00			
3am																							0.00			
4am																							0.00			
5am																							0.00			
6am																							0.00			
TOTAL	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00			
														Hour Summary		Weekly	Monthly	Annual								
KEY: 1:1 = 1.00														Consumer #1:		-	-	-								
1:2 = 0.50														Consumer #2:		-	-	-								
1:3 = 0.33 for 2 consumers and 0.34 for 1 consumer														Consumer #3:		-	-	-								

Missouri Division of Developmental Disabilities - ISL Budget Form									
		<input type="checkbox"/> INITIAL		<input type="checkbox"/> ANNUAL					
		<input type="checkbox"/> UPDATE		<input type="checkbox"/> RAS CHANGE					
INDIVIDUAL NAME				PROVIDER					
DMH STATE ID #				MEDICAID DCN #					
STREET ADDRESS				CITY	ZIP				
HOME NAME				BUDGET AUTHORIZATION PERIOD					
PROFESSIONAL MANAGER				# OF INDIVIDUALS SHARING HOUSEHOLD					
Does a lease exist?(select drop down) →				If "other" indicate who:					
If "YES" select signature on lease from drop down →									
BUDGET PLAN									
ROOM AND BOARD					RESIDENTIAL HABILITATION				
Room & Board	Total Cost	Other Resources	Source	Remaining Cost	Direct Support				
					\$ - x [] hours = \$ -				
Food & Household Supplies	\$ -	\$ -		\$ -	Live In Caregiver (if applicable) Room & Board expenses \$ - Salary expenses \$ -				
Rent	\$ -	\$ -		\$ -					
Laundry	\$ -	\$ -		\$ -					
Utilities	\$ -	\$ -		\$ -					
Maintenance & Household	\$ -	\$ -		\$ -					
TOTAL MONTHLY ROOM & BOARD				\$ -	Other (if applicable) \$ -				
DMH AUTHORIZED AMOUNT FOR ROOM AND BOARD									
PAYEE STATUS (select from drop down) → Name: [] Address: [] City/State/Zip: []					TOTAL MONTHLY RESIDENTIAL HABILITATION \$ -				
					TOTAL DAILY RESIDENTIAL HABILITATION \$ -				
					Keeping the Mo Healthnet application current is the Responsibility of the provider agency. Providers of ISL services shall maintain compliance with 42 CFR 441.301.				
BENEFITS:									
SSA \$ - SSI \$ - VA \$ - INDIVIDUAL DIRECT PAY \$ - OTHER \$ -									
IDA in effect? ↓ (IDA dropdown) []									
PERSONAL ALLOWANCE \$ - SPEND DOWN OR TTW \$ - ANCILLARY COSTS \$ -									
PROVIDER SIGNATURE				DATE					
SUPPORT COORDINATOR SIGNATURE				DATE					
SUPPORT COORDINATOR SUPERVISOR SIGNATURE				DATE					
REGIONAL DIRECTOR/DESIGNEE SIGNATURE				DATE					